



PPO PLAN BENEFIT SUMMARY FOR INDIVIDUALS WHO RETIRED PRIOR TO 3-1-13

This document is meant as a summary description of basic benefit coverage. It cannot add to or take away from any legal plan. This document describes the benefit program in general terms. It is not intended to be a complete description of coverage.

THE CITY'S HEALTH INSURANCE PLAN HAS THE FOLLOWING EXCLUSIONS: Dental care, cosmetic surgery unless medically necessary, eyeglasses, contact lenses, dentures, hearing aids for adults, custodial or domiciliary care, experimental medical procedures, examinations for employment, sports or purchase of insurance, care required while in government operated facility or services required while incarcerated or in military service. Refer to your Benefit Booklet for further details.

- **If your primary residence is located within Anthem's *Blue Priority* service area (see map):**
 - In-Network: select "*Blue Priority*" network to verify provider participation; when traveling outside of Wisconsin, select "*National PPO (Blue Card PPO)*".
 - Out of Network: any non- "*Blue Priority*" or "*National PPO (Blue Card PPO)*" provider.

- **If your primary residence is in Wisconsin but located outside of Anthem's *Blue Priority* service area (see map):**
 - In-Network: select "*Blue Preferred*" network to verify provider participation; when traveling outside of Wisconsin, select "*National PPO (Blue Card PPO)*".
 - Out of Network: any non- "*Blue Preferred*" or "*National PPO (Blue Card PPO)*" provider.

- **If your primary residence is outside of Wisconsin:**
 - In-Network: select "*National PPO (Blue Card PPO)*" to verify provider participation.
 - Out of Network: any non- "*National PPO (Blue Card PPO)*" provider.

	IN NETWORK SERVICES	OUT OF NETWORK SERVICES
MAXIMUM COVERAGE	No dollar limit.	\$1,000,000 annually if retired prior to 3-1-12; \$1,250,000 annually if retired 3-1-12 to 2-28-13.
DEDUCTIBLES	No deductible.	Unless otherwise noted, across the board deductibles of \$200 per person or \$600 per family per Plan year.
PERCENT OF COVERED CHARGES (COINSURANCE)	100% of eligible charges after applicable copays.	<p>Unless otherwise noted, the Plan pays 70% of the reasonable & customary charges for medically necessary/eligible services after the deductible has been satisfied.</p> <p>Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: the Plan pays 80% of reasonable & customary charges for medically necessary/eligible services after deductible has been satisfied, unless otherwise noted.</p>
ANNUAL OUT-OF-POCKET LIMIT ON EXPENSES	No dollar limit.	Maximum out-of-pocket coinsurance (including the deductible) is \$1,500 per person or \$3,000 per family per Plan year; thereafter, the Plan pays 100% of reasonable & customary charges for medically necessary/eligible services.
AMBULANCE	100% of eligible charges when medically necessary.	Same as in network services.
URGENT CARE FACILITY	100% of eligible charges if billed as "urgent care" visit; member subject to office visit copay if billed as "office visit"; member subject to ER copay if billed as "emergency visit".	Same as in network services.

	IN NETWORK SERVICES	OUT OF NETWORK SERVICES
24/7 Nurseline	Available 24 hours a day, 7 days a week at no cost	
EMERGENCY CARE	<p>100% of eligible charges if admitted inpatient, doctor directed or transported by emergency vehicle; otherwise \$25 copay. <i>(Note: individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-28-12 are also subject to this benefit level.) (Applies to retiree groups not listed in categories on next page.)</i></p> <p>100% of eligible charges if written directive from doctor, admitted inpatient, or transported by emergency vehicle; otherwise \$75 copay for Non-Reps/Dept Hds/City Atty/Judge who retired 3-1-07 to 2-28-10; Police (WAPPA)/Fire (IAFF) unions who retired 3-1-07 to 2-28-09; Nurses/Engineering unions who retired 3-1-07 to 2-28-11; and Mayor/Alderspersons who retired 4-15-08 to 2-28-10. (Applies to retiree groups 42, 46, & 48.)</p> <p>100% of eligible charges ONLY IF admitted inpatient or transported by emergency vehicle; otherwise \$75 copay for Police (WAPPA)/Fire (IAFF) unions who retired 3-1-09 to 2-28-13; Non-Reps/Dept Hds/Elected Officials who retired 3-1-10 to 2-28-13; Nurses/Engineering unions who retired 3-1-11 to 12-31-11; individuals converted to Non-Rep status (former Nurses and Engineering union members) who retired 1-1-12 to 2-28-13, and (former AFSCME union members) who retired 3-1-12 to 2-28-13. (Applies to retiree groups 47, 49, 52, 53, 55, 57, 58 & 59.)</p>	Same as in network services.
ROUTINE PHYSICALS & HEALTH CHECKUPS	100% of eligible charges. Subject to office visit copay (as listed under Physician Office Visits).	Not covered.
IMMUNIZATIONS & INJECTIONS	100% of eligible charges.	Not covered.
X-RAY & LAB TESTS	100% of eligible charges.	<p>70% of reasonable & customary charges, with prior authorization.</p> <p>Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of reasonable & customary charges, with prior authorization.</p>
EYE EXAMS	100% of eligible charges (routine vision care limited to one visit per Plan year). Subject to office visit copay (as listed under Physician Office Visits).	Not covered.
ALLERGY CARE	100% of eligible charges. Subject to office visit copay (as listed under Physician Office Visits).	<p>70% of reasonable & customary charges.</p> <p>Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of reasonable & customary charges.</p>

	IN NETWORK SERVICES	OUT OF NETWORK SERVICES
HEARING EXAMS	100% of eligible charges. Subject to office visit copay (as listed under Physician Office Visits).	Not covered.
PHYSICIAN OFFICE VISITS	<p>100% of eligible charges except as noted below.</p> <p>\$10 office visit co-pay with capitation at five (5) visits per person per Plan year for Local 80 (PW & Clerical) retirees 3-1-04 to 12-31-11, individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-28-12; Police (WAPPA) 12-1-03 to 2-28-07; Fire (IAFF) 1-1-04 to 2-28-07; Nurses 8-1-04 to 2-28-07; Engineers 1-1-04 to 2-28-07; Non Reps/Dept Hds/City Atty/Judge 3-1-04 to 2-28-07; Mayor/Alderspersons 3-1-04 to 4-14-08. (Applies to retiree groups 20, 21, 24, 45, & 50.)</p> <p>\$20 office visit copay with max. of \$200 single/\$400 couple/\$600 family for Non-Reps/ Dept Hds/Police (WAPPA)/Fire (IAFF)/City Atty/Judge who retired 3-1-07 to 2-28-09; Nurses/Engineering unions 3-1-07 to 2-28-11; and Mayor/Alderspersons 4-15-08 to 2-28-09. (Applies to retiree groups 42 & 46.)</p> <p>\$20 office visit copay with NO maximum Plan year out-of pocket. Co-pay waived for wellness/routine/preventative services for Police (WAPPA)/Fire (IAFF)/Non-Reps/Dept Hds/Elected Officials who retired on or after 3-1-09; Nurses/Engineering unions who retired 3-1-11 to 12-31-11; individuals converted to Non-Rep status (former Nurses/Engineering union members) who retired on or after 1-1-12; and individuals converted to Non-Rep status (former AFSCME union members) who retired on or after 3-1-12. (Applies to retiree groups 47, 48, 49, 52, 53, 55, 57, 58, & 59.)</p>	<p>70% of reasonable & customary charges.</p> <p>Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of reasonable & customary charges.</p>
PHYSICIAN VISITS IN HOSPITAL	100% of eligible charges.	<p>70% of reasonable & customary charges, with prior authorization.</p> <p>Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of reasonable & customary charges, with prior authorization.</p>
DURABLE MEDICAL EQUIPMENT	100% of eligible charges for initial purchase or rental when authorized; does not cover repair or replacement.	<p>70% of reasonable & customary charges for initial purchase or rental when authorized; does not cover repair or replacement.</p> <p>Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of reasonable/customary charges for initial purchase/rental when authorized; does not cover repair or replacement.</p>

	IN NETWORK SERVICES	OUT OF NETWORK SERVICES
PODIATRY SERVICES PROVIDED BY A PODIATRIST	<p>SUBJECT TO OUT-OF-NETWORK BENEFIT LEVELS. (Applies to retiree groups 2, 8, 10, 11, 12, 13, 15, 16, 17, 18, 19, 20, 21, 24, 42, 47, 53, & 59.)</p> <p>Non-Reps/Dept Hds/Elected Officials/ Local 80 (PW & Clerical) who retired on or after 4-1-08; Nurses who retired on or after 7-1-08; Engineers who retired on or after 8-1-08; Police (WAPPA) union who retired on or after 3-1-12; and individuals converted to Non-Rep status (former AFSCME, Nurses, Engineering union members who retired on or after 1-1-12). Subject to office visit copay (as listed under Physician Office Visits).</p>	<p>70% of reasonable & customary for non-routine care only.</p> <p>Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of reasonable & customary for non-routine care only.</p>
MATERNITY	Hospital & physician charges covered at 100% of eligible charges; dependent daughters covered.	<p>70% of reasonable & customary charges, with prior authorization.</p> <p>Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of reasonable & customary charges, with prior authorization.</p>
PEDIATRIC CARE	100% of eligible charges. Subject to office visit copay (as listed under Physician Office Visits).	<p>70% of reasonable & customary charges.</p> <p>Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of reasonable & customary charges.</p>
SHORT TERM PHYSICAL THERAPY	<p>100% of eligible charges as long as it is deemed medically necessary (provider must be able to document improvement in the condition as a review will be required after 15 visits).</p> <p>NOTE: Subject to an office visit copay (as listed under Physician Office Visits) if provider bills as an office visit; if billed as a physical therapy appointment, no copay.</p>	<p>70% of reasonable & customary charges.</p> <p>Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of reasonable & customary charges.</p>
CHIROPRACTIC CARE	100% of eligible charges. (Provider must be able to document improvement in condition after 15 visits). Subject to office visit copay (as listed under Physician Office Visits).	<p>70% of reasonable & customary charges.</p> <p>Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of reasonable & customary charges.</p>
RADIATION THERAPY	100% of eligible charges.	<p>70% of reasonable & customary charges, with prior authorization.</p> <p>Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of reasonable & customary charges, with prior authorization.</p>

	IN NETWORK SERVICES	OUT OF NETWORK SERVICES
ALCOHOLISM/ DRUG ABUSE	Included in psychiatric and mental health benefits.	Included in psychiatric and mental health benefits.
OUTPATIENT MENTAL HEALTH SERVICES	100% of eligible charges. Subject to office visit copay (as listed under Physician Office Visits).	90% of reasonable & customary charges; not subject to deductible. <u>TRANSITIONAL CARE</u> - 90% of reasonable & customary charges; not subject to deductible.
INPATIENT PSYCHIATRIC CARE	100% of eligible charges.	90% of reasonable & customary charges, with prior authorization; not subject to deductible.
HOSPITALIZATION	100% of eligible charges.	70% of reasonable & customary charges, with prior authorization. Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of reasonable & customary charges, with prior authorization.
SURGICAL CARE OR SURGERY	100% of eligible charges.	70% of reasonable & customary charges, with prior authorization. Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of reasonable & customary charges, with prior authorization.
ORAL SURGERY	100% of eligible charges for initial treatment for injury to sound, natural teeth & for specific diseases, including removal of full bony symptomatic impacted wisdom teeth. Prior authorization required.	70% of eligible charges for initial treatment for injury to sound natural teeth and for specific diseases, including removal of full bony symptomatic impacted wisdom teeth. Prior authorization required. Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of eligible charges for initial treatment for injury to sound natural teeth and for specific diseases, including removal of full bony symptomatic impacted wisdom teeth. Prior authorization required.
DEPENDENT COVERAGE	Refer to the last page of this document for details.	
COORDINATION OF BENEFITS	Benefits under this Plan are coordinated with benefits provided by other plans for which you and/or your dependents are also covered. Refer to the <i>Coordination of Benefits</i> section in your Benefit Booklet for details.	
TELEMEDICINE	IN NETWORK SERVICES Anthem's LiveHealth Online	OUT OF NETWORK SERVICES
	100% of eligible charges after office visit copay, if applicable.	80% of eligible charges after deductible.

PRESCRIPTION DRUGS	IN NETWORK SERVICES Retail: Express Scripts (nationwide network) Mail Order: Express Scripts	OUT OF NETWORK SERVICES																																	
	<p>Cost per prescription or refill; up to 34-day retail supply and 90-day mail order supply (includes insulin and diabetic supplies).</p> <p>All who retired prior to 3-1-03; OR 1-1-03 for Fire (IAFF) union; OR 12-1-03 for Police (WAPPA) union; OR 8-1-04 for Nurses union. (Applies to retiree groups 2, 8, 10, 11, 12, 13, 15, & 16):</p> <table border="1" data-bbox="456 527 894 615"> <tr> <th></th><th>Retail</th><th>Mail Order</th></tr> <tr> <td>Generic</td><td>\$3</td><td>\$0</td></tr> <tr> <td>Brand</td><td>\$5</td><td>\$3</td></tr> </table> <p>Police (WAPPA)/Fire (IAFF)/Nurses/Engineering unions who retired 3-1-07 to 2-28-09; Non-Reps/Dept Hds/City Atty/Judge who retired 3-1-07 to 2-28-13 and individuals converted to Non-Rep status (former AFSCME, Nurses & Engineering union members) who retired 3-1-12 to 2-28-13; Mayor/Alderspersons who retired 4-15-08 to 2-28-13. (Applies to retiree groups 42, 46, 48, 49, 55, & 58):</p> <table border="1" data-bbox="394 961 954 1188"> <tr> <th></th><th>Retail</th><th>Mail Order</th></tr> <tr> <td>Generic Drugs on Plan Manager's Drug List</td><td>\$10</td><td>\$20</td></tr> <tr> <td>Brand Name Drugs on Plan Manager's Drug List</td><td>\$20</td><td>\$40</td></tr> <tr> <td>Generic & Brand Name Drugs not on Plan Manager's Drug List</td><td>\$30</td><td>\$60</td></tr> </table> <p>Police (WAPPA)/Fire (IAFF) unions who retired 3-1-09 to 2-28-13; Nurses/Engineering unions who retired 3-1-11 to 12-31-11; individuals converted to Non-Rep status (former Nurses/Engineering union members who retired 1-1-12 to 2-28-12). (Applies to retiree groups 47, 52, 53, 57, & 59):</p> <table border="1" data-bbox="394 1472 954 1698"> <tr> <th></th><th>Retail</th><th>Mail Order</th></tr> <tr> <td>Generic Drugs on Plan Manager's Drug List</td><td>\$10</td><td>\$25</td></tr> <tr> <td>Brand Name Drugs on Plan Manager's Drug List</td><td>\$20</td><td>\$50</td></tr> <tr> <td>Generic & Brand Name Drugs not on Plan Manager's Drug List</td><td>\$30</td><td>\$75</td></tr> </table> <p>Note: Prescriptions for equipment/items deemed medically necessary (such as, but not limited to, crutches, compression stockings, diabetic meters) are covered under the <i>Durable Medical Equipment</i> section.</p>		Retail	Mail Order	Generic	\$3	\$0	Brand	\$5	\$3		Retail	Mail Order	Generic Drugs on Plan Manager's Drug List	\$10	\$20	Brand Name Drugs on Plan Manager's Drug List	\$20	\$40	Generic & Brand Name Drugs not on Plan Manager's Drug List	\$30	\$60		Retail	Mail Order	Generic Drugs on Plan Manager's Drug List	\$10	\$25	Brand Name Drugs on Plan Manager's Drug List	\$20	\$50	Generic & Brand Name Drugs not on Plan Manager's Drug List	\$30	\$75	<p>70% of charges per prescription or refill; up to a 34-day supply.</p> <p>Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of charges per prescription or refill, up to a 34-day supply.</p> <p>Not subject to deductible or annual/lifetime maximum.</p>
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PRESCRIPTION DRUGS	IN NETWORK SERVICES Retail: Express Scripts (nationwide network) Mail Order: Express Scripts	OUT OF NETWORK SERVICES												
	<p>Cost per prescription or refill; up to 34-day retail supply and 90-day mail order supply (includes insulin and diabetic supplies).</p> <p>Police (WAPPA) union who retired 12-1-03 to 2-28-07; Fire (IAFF) union who retired 1-1-03 to 2-28-07; Non-Reps/Dept Hds/City Atty/Judge/Engineering union who retired 3-1-03 to 2-28-07; Local 80 (PW & Clerical) who retired 3-1-03 to 12-31-11; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-28-12; and Mayor/Alderspersons who retired 3-1-03 to 4-14-08 (Applies to retiree groups 17, 18, 19, 20, 21, 24, 45, & 50):</p> <table border="1" data-bbox="396 741 953 968"> <thead> <tr> <th></th><th>Retail</th><th>Mail Order</th></tr> </thead> <tbody> <tr> <td>Generic Drugs on Plan Manager's Drug List</td><td>\$5</td><td>\$5</td></tr> <tr> <td>Brand Name Drugs on Plan Manager's Drug List</td><td>\$15</td><td>\$15</td></tr> <tr> <td>Generic & Brand Name Drugs not on Plan Manager's Drug List</td><td>\$25</td><td>\$25</td></tr> </tbody> </table> <p>Note: Prescriptions for equipment/items deemed medically necessary (such as, but not limited to, crutches, compression stockings, diabetic meters) are covered under the <i>Durable Medical Equipment</i> section.</p>		Retail	Mail Order	Generic Drugs on Plan Manager's Drug List	\$5	\$5	Brand Name Drugs on Plan Manager's Drug List	\$15	\$15	Generic & Brand Name Drugs not on Plan Manager's Drug List	\$25	\$25	<p>70% of charges per prescription or refill; up to a 34-day supply.</p> <p>Local 80 (PW & Clerical) retirees prior to 1-1-12; individuals converted to Non-Rep status (former AFSCME union members) who retired 1-1-12 to 2-29-12; retired Mayor/Alderspersons prior to 4-15-08; other retirees prior to 3-1-07: 80% of charges per prescription or refill, up to a 34-day supply.</p> <p>Not subject to deductible or annual/lifetime maximum.</p>
	Retail	Mail Order												
Generic Drugs on Plan Manager's Drug List	\$5	\$5												
Brand Name Drugs on Plan Manager's Drug List	\$15	\$15												
Generic & Brand Name Drugs not on Plan Manager's Drug List	\$25	\$25												

DEPENDENT COVERAGE:

Dependent means a covered **employee's**:

1. Legally recognized spouse;
2. Natural blood related child, step-child, legally adopted child or a child under **your** legal guardianship as determined with a court decree whose age is less than the limiting age. Each child must legally qualify as a **dependent** as defined by the United States Internal Revenue Service guidelines or applicable State Statutes.

Limiting age and eligibility criteria:

Dependent children under age 26 (as required by federal and state mandates):

The limiting age for each **dependent** child is the end of the month he or she attains the age of 26 years, regardless if the child is:

- a. Married;
- b. A tax dependent;
- c. A student;
- d. Employed;
- e. Residing with or receives financial support from *you*; or
- f. Eligible for other coverage through employment.

Dependent child, age 26 and older (as required by State mandate), who is called to federal active duty:

The limiting age is any age for each **dependent** child age 26 and older when they meet the requirements outlined below. **Dependent** termination is the end of the month they no longer meet these requirements.

- The child is a full-time student; and
 - The child was called to federal active duty in the National Guard or in a reserve component of the U.S. armed forces while the child was attending an institution of higher education on a full-time basis; and
 - The child was under age 27 when called to federal active duty; and
 - The child applies for full-time student status at an institution of higher education up to 12 months after completing active duty; and
 - If the child is called to active duty more than once within a four-year period of time, the child's age at the time of their first call to active duty will be used when determining eligibility under this Plan.
3. A covered **employee's** child whose age is less than the limiting age and is entitled to coverage under the provisions of this Plan because of a medical child support order;
 4. Grandchild, as long as the **employee's** covered **dependent**, who is the parent of the grandchild, is not yet age 18.

You must furnish satisfactory proof to the **City** upon request that the above conditions continuously exist. If satisfactory proof is not submitted to the **City**, the child's coverage will not continue beyond the last date of eligibility.

A covered **dependent** child who attains the limiting age while covered under the Plan will remain eligible for medical benefits if all of the following exist at the same time:

1. Permanently mentally disabled or permanently physically handicapped;
2. Incapable of self-sustaining employment;
3. The child meets all of the qualifications of a **dependent** as determined by the United States Internal Revenue Service;
4. Unmarried.

You must furnish satisfactory proof to the **City** that the above conditions continuously exist on and after the date the limiting age is reached. The **City** may not request such proof more often than annually after two years from the date the first proof was furnished. If satisfactory proof is not submitted to the **City**, the child's coverage will not continue beyond the last date of eligibility.